

Form NCR-1: NOMINATION CONTEST REPORT

Completion Guide

This form is available on the Elections Ontario website. When filing out this form, please print clearly or type your information. Forms may be submitted by any conventional delivery method, including mail, fax, and email or hand delivery.

This form must be completed by a registered party or by a registered constituency association - if the candidate is selected by the association; within 30 days after the candidate is selected.

A. REGISTERED POLITICAL ENTITY INFORMATION

Provide the full name of the registered political party, the electoral district of the registered constituency association, and the type of event that the nomination contest concerns. This form must be submitted by the political entity that held the nomination contest.

B. NOMINATION CONTEST INFORMATION

Provide the number of contestants as of voting date and the contest period (the date on which the contest for the nomination began and the date on which the candidate was selected).

Additionally, parties should **promptly** advise the CEO of the following:

- The date of the opening and closing of nominations.
- The names of any persons who withdrew, or were disqualified from running, after the date of the opening of nominations.
- The names of any candidates who have been appointed by the party in lieu of holding a vote/selection by a constituency association, and the date of such appointments. *Contact Elections Ontario to report candidates appointed on or after July 1st, 2017 via a supplemental form - available in either Microsoft Word or Excel format.*

C. SELECTED CANDIDATE

Provide the name of the candidate who was selected and the method of selection.

D. WITHDRAWN OR DISQUALIFIED CONTESTANT(S)

Provide the name(s) of any contestants who withdrew or were disqualified during the nomination contest period.

E. NOMINATION CONTESTANT(S) INFORMATION

Provide the name and address of each nomination contestant as of the date the candidate was selected and of their chief financial officer.

F. CERTIFICATION OF POLITICAL PARTY OR CONSTITUENCY ASSOCIATION'S CFO

The CFO of the registered political entity holding the nomination contest must complete and sign this section. The political party (or designate) or constituency association's CFO signing the form must currently be on file with the Chief Electoral Officer as per the most recently filed Registration and Change Notice Form – P-1 Form for the Political Party or A-1 Form for the Constituency Association. The registered political party's CFO must provide written authorization for appointing a designate.

It is the registered political party/constituency association's responsibility to file a complete and accurate form with the Chief Electoral Officer.

This form may be inspected during office hours of Elections Ontario. Any person may make extracts from the documents and is entitled to copies of the documents upon payment for their preparation at such rate as the Chief Electoral Officer may determine. Certain data will also be extracted from the information filed and displayed on the Elections Ontario website.

The Chief Electoral Officer's staff is always available to provide assistance. Please contact us at:

Elections Ontario	Telephone: 416-325-9401
Compliance Division	Toll Free: 1-866-566-9066
51 Rolark Drive	Fax: 416-325-9466
Toronto, ON M1R 3B1	Email: ElectFin@elections.on.ca
Internet address: http://www.elections.on.ca	

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Disponible aussi en français.

Section D: Withdrawn or Disqualified Contestant(s)

First Name: _____ Last Name: _____

First Name: _____ Last Name: _____

First Name: _____ Last Name: _____

Section E: Nomination Contestant(s) Information

CONTESTANT:

First Name: _____ Last Name: _____

Business Tel: _____ Home Tel: _____

Fax: _____ Email: _____

Address: _____

City: _____ Postal Code: _____

CFO's Name: _____

Address: _____

City: _____ Postal Code: _____

Tel: _____ Email: _____

CONTESTANT:

First Name: _____ Last Name: _____

Business Tel: _____ Home Tel: _____

Fax: _____ Email: _____

Address: _____

City: _____ Postal Code: _____

CFO's Name: _____

Address: _____

City: _____ Postal Code: _____

Tel: _____ Email: _____

To add additional Contestants, copy this page, fill out as necessary, and include with your report.

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CONTESTANT:

First Name: _____ **Last Name:** _____

Business Tel: _____ **Home Tel:** _____

Fax: _____ **Email:** _____

Address: _____

City: _____ **Postal Code:** _____

CFO's Name: _____

Address: _____

City: _____ **Postal Code:** _____

Tel: _____ **Email:** _____

CONTESTANT:

First Name: _____ **Last Name:** _____

Business Tel: _____ **Home Tel:** _____

Fax: _____ **Email:** _____

Address: _____

City: _____ **Postal Code:** _____

CFO's Name: _____

Address: _____

City: _____ **Postal Code:** _____

Tel: _____ **Email:** _____

Section F: Certification of Political Party or Constituency Association's CFO

The chief financial officer of the registered political entity that held the nomination contest must complete and sign this section.

I, _____ (Name of CFO or Party designate), certify that, to the best of my knowledge and belief, the information on this form is true and correct.

Signature of CFO or Party designate: _____

Date: _____